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How to Complete an Affidavit of Domestic Partnership

Sworn Proof of a Committed Relationship for Benefits, Insurance, or Housing

INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR AFFIDAVIT OF DOMESTIC PARTNERSHIP.

About this form. Many employers, insurers, schools, and landlords offer benefits to domestic partners and ask for a **sworn affidavit** showing the partners share a committed relationship and a household. This form covers what they typically require. It is **not** the same as registering a domestic partnership with the California Secretary of State, which uses the State's own form.

1. **Check the organization's requirements**
   Some employers or insurers require their own form, a minimum time living together, or specific proof. Ask first.
2. **Fill in both partners**
   Use full legal names and dates of birth exactly as on your IDs.
3. **Enter your shared address and start date**
   Enter where you live together and the month and year you began living there.
4. **Mark shared finances and attach proof**
   Mark what applies, and attach copies such as a joint lease or bank statement if requested.
5. **Both partners sign in front of a notary**
   Each partner signs under oath. Do **not** sign ahead of time. Each brings a current government-issued photo ID. We come to you.
6. **Give it to the organization**
   Submit the original and keep a copy. Tell the organization if the partnership ends.

Good to Know

- To register a domestic partnership with the State of California, use the Secretary of State's Declaration of Domestic Partnership — we notarize that too.
- Employer-provided partner benefits can have tax consequences. Ask your HR department or a tax advisor.
- A false statement in this affidavit is perjury and can result in loss of benefits.

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SCAN TO BOOK

Questions about this document? Talk to an attorney. Gavrilov & Brooks Law Firm has attorneys licensed in California, Nevada, and other states. Phone and video consultations are available. **(916) 504-0529** · **www.gavrilovlaw.com**

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YOUR FORM BEGINS ON THE NEXT PAGE

AFFIDAVIT OF DOMESTIC PARTNERSHIP

Sworn Statement of Committed Relationship and Shared Household

State of California)

County of _____) ss.

We, the undersigned, being first duly sworn according to law, each depose and say:

1. Partners.

_____ _____

(full name of Partner A) (date of birth)

_____ _____

(full name of Partner B) (date of birth)

2. Relationship. We are in a committed relationship and intend to remain so. We are each at least 18 years old and mentally competent. Neither of us is married to, or in a domestic partnership with, anyone else. We are not related by blood in a way that would bar marriage in California.

3. Shared residence. We have lived together at the following address since

_____ _____

(address, city, state, ZIP) (month and year)

4. Shared finances (mark all that apply; attach proof if requested):

- ☐ Joint lease, mortgage, or deed
- ☐ Joint bank or credit account
- ☐ Each named as beneficiary on the other's life insurance or retirement account
- ☐ Joint ownership of a vehicle or other major asset
- ☐ Shared household expenses

5. Registration (mark one): ☐ We are registered domestic partners with the California Secretary of State ☐ We are not registered.

6. Purpose and notice. This affidavit is made for:

_____

(e.g., employer health benefits, insurance, housing, or leave)

We will notify the organization relying on this affidavit if our partnership ends.

Each of us declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Partner A

_____

(signature)

_____ _____

(printed name) (date)

Partner B

_____

(signature)

_____ _____

(printed name) (date)

Both partners sign in front of the notary, who will place each under oath and complete the jurat on the next page.

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JURAT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of _____)

Subscribed and sworn to (or affirmed) before me on this _____ day of _____ , 20 _____

by _____

(name(s) of signer(s))

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(Seal)

Signature _____